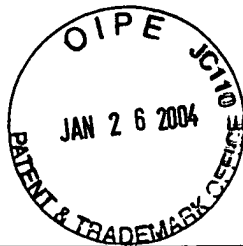


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APR 28148 ✓

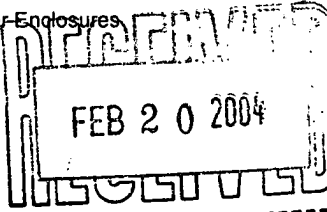
PTO/SB/21 (08-00)

# TRANSMITTAL FORM

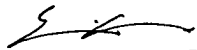
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<b>TRANSMITTAL FORM</b>	<b>Application Number</b>	09/327,469	
	<b>Filing Date</b>	June 8, 1999	
	<b>First Named Inventor</b>	Shunpei YAMAZAKI	
	<b>Group Art Unit</b>	2814	
	<b>Examiner Name</b>	G. Peralta	
<b>Total Number of Pages in This Submission</b>		<b>Attorney Docket Number</b>	0756-1982


## ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Declaration and Power of Attorney <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosures 1. _____ 2. _____ 3. _____ 4. _____ 5. _____ 6. _____
<b>Remarks</b> <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any additional fees required or credit any overpayments to Deposit Account No. 50-2280 for the above identified docket number.		

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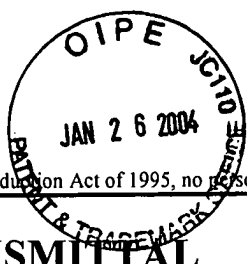
<b>Firm or Individual name</b>	Eric J. Robinson, Reg. No. 38,285 Robinson Intellectual Property Law Office, P.C. PMB 955 21010 Southbank Street Potomac Falls, VA 20165
<b>Signature</b>	
<b>Date</b>	1-23-04

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<b>Signature</b>		<b>Date</b>	1-23-04

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**FEE TRANSMITTAL  
FOR FY 2004**

Effective 10/01/2003. Patent fees are subject to annual revision.

☐ Applicant Claims small entity status. See 37 CFR 1.27.

TOTAL AMOUNT OF PAYMENT (\$110.00)

## Complete if Known

Application Number	09/327,469
Filing Date	June 8, 1999
First Named Inventor	Shunpei YAMAZAKI
Examiner Name	G. Peralta
Group Art Unit	2814
Attorney Docket No.	0756-1982

## METHOD OF PAYMENT

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Law Office

- ☒
- Charge Any Additional Fee Required
- 
- Under 37 CFR 1.16 and 1.17 and
- 
- credit overpayments

- ☐
- Applicant claims small entity status.
- 
- See 37 CFR 1.27

- 2.
- ☒
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- Credit Card
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- Money
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- Order
- ☐
- Other

## FEE CALCULATION

## 1. BASIC FILING FEE

Large Entity Fee Code	Fee (\$)	Small Entity Fee Code	Fee (\$)	Fee Description	Fee Paid
1001	770	2001	385	Utility filing fee	
1002	340	2002	170	Design filing fee	
1003	530	2003	265	Plant filing fee	
1004	770	2004	385	Reissue filing fee	
1005	160	2005	80	Provisional filing fee	

SUBTOTAL (1) (\$)

## 2. EXTRA CLAIM FEES

Total Claims	Extra Claims	Fee from below	Fee Paid
	-20** =	X \$18 =	
Independent Claims	-3** =	X \$86 =	
Multiple Dependent		=	

Large Entity Fee Code	Fee (\$)	Small Entity Fee Code	Fee (\$)	Fee Description
1202	18	2202	9	Claims in excess of 20
1201	86	2201	43	Independent claims in excess of 3
1203	290	2203	145	Multiple dependent claim, if not paid
1204	86	2204	43	** Reissue independent claims over original patent
1205	18	2205	9	** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$)

\*\*or number previously paid, if greater; For Reissues, see above

## FEE CALCULATION (continued)

## 3. ADDITIONAL FEES

Fee Code	Large Entity Fee (\$)	Small Entity Fee (\$)	Fee Description	Fee Paid
1051	130	2051	65 Surcharge - late filing fee or oath	
1052	50	2052	25 Surcharge - late provisional filing fee or cover sheet	
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1453	1,330	2453	665 Petition to revive - unintentional	
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1802	900	1802	900 Request for expedited examination of a design application	

Other fee (specify) Terminal Disclaimer

\* Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$110.00)

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## SUBMITTED BY

Name (Print/Type)	Eric J. Robinson	Registration No. (Attorney/Agent)	38,285	Telephone	(571) 434-6789
Signature	<i>Eric J. Robinson</i>	Date	1-23-04		



PTO/SB/21 (08-00)

**TRANSMITTAL  
FORM**

(to be used for all correspondence after initial filing)

<b>Application Number</b>	09/327,469		
	<b>Filing Date</b>	June 8, 1999	
	<b>First Named Inventor</b>	Shunpei YAMAZAKI	
	<b>Group Art Unit</b>	2814	
	<b>Examiner Name</b>	G. Peralta	
<b>Total Number of Pages in This Submission</b>		<b>Attorney Docket Number</b>	0756-1982

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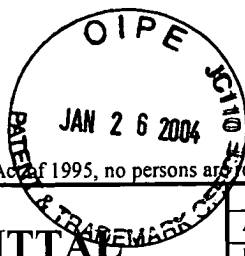
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**FEE TRANSMITTAL  
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☐ Applicant Claims small entity status. See 37 CFR 1.27.

TOTAL AMOUNT OF PAYMENT (\$110.00)

Complete if Known

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SUBTOTAL (1) (\$)

**2. EXTRA CLAIM FEES**

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Multiple Dependent			

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**FEE CALCULATION (continued)****3. ADDITIONAL FEES**

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1453	1,330	2453	665	Petition to revive - unintentional	
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Other fee (specify) Terminal Disclaimer

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Name (Print/Type) Eric J. Robinson

Registration No.  
(Attorney/Agent)

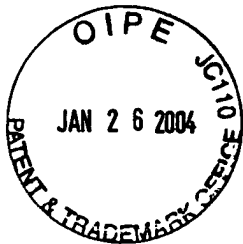
38,285

Complete (if applicable)

Telephone (571) 434-6789

Signature

Date 1-23-04



Attorney Docket No. 0756-1982

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of:

Shunpei YAMAZAKI

Serial No. 09/327,469

Filed: June 8, 1999

For: SEMICONDUCTOR DEVICE AND  
METHOD OF MANUFACTURING  
THE SAME

) Group Art Unit: 2814

) Examiner: G. Peralta

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P.O. Box 1450, Alexandria, VA 22313-1450, on

) 1.23.04

) Adeline M. Stampu

**AMENDMENT**

Honorable Commissioner of Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

In response to the Official Action dated September 24, 2003, please consider the following amendments and remarks in connection with the above-identified application.

**Amendments to the Claims** are reflected in the listing of claims which begins on page 2 of this paper.

**Remarks** begin on page 9 of this paper.

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